



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: RUBEN et al.

Application Serial No.: 09/848,271

Group Art Unit: Not assigned

Filed: May 4, 2001

Examiner: Not assigned

For: Human Tumor Necrosis Factor
TR18 and Methods Based Thereon

Atty. Docket No.: PF526

RESPONSE TO NOTICE TO FILE MISSING PARTS (Paper No. 5)

Attn: Office of Initial Patent Examination
BOX MISSING PARTS
Commissioner For Patents
Washington, D.C. 20231

Sir:

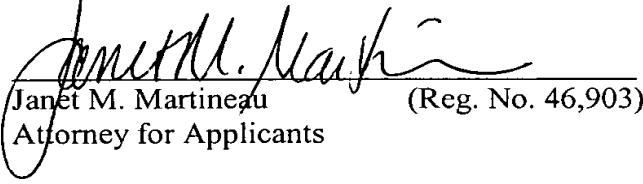
In response to the Decision Granting Petition; Notice of Missing Parts (Paper No. 5) mailed December 17, 2001, submitted herewith are: 1) a Fee Transmittal sheet with appropriate fee; 2) an executed Declaration and Power of Attorney; and 3) a copy of the Decision Granting Petition; Notice of Missing Parts.

Entry of the above-referenced papers is respectfully requested.

The Commissioner is hereby authorized to charge the required fee of \$130.00, and any other fee deemed necessary, to Deposit Account No. 08-3425, as noted on the enclosed Fee Transmittal Sheet.

Respectfully submitted,

Dated: January 30, 2002


Janet M. Martineau (Reg. No. 46,903)
Attorney for Applicants

02/04/2002 NBERHE 00000093 09848271

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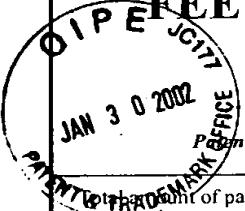
04/09/2002 NPIASASD 00000018 083425 09848271

01 FC:118 1440.00 CH

Enclosures
JMM/BM/lcc

Human Genome Sciences, Inc.
9410 Key West Avenue
Rockville, Maryland 20850
301-315-2723 (telephone)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



FEET TRANSMITTAL for FY 2002

(Substitute form)

Patent fees are subject to annual revision.

Sector SP

		Complete if Known	
		Application Number	09/848,271
		Filing Date	May 4, 2001
		First Named Inventor	Ruben, et al.
		Examiner Name	
		Group Art Unit	
Amount of payment	\$ 130.00	Attorney Docket Number	PF526

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																																																																																	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number 08-3425 Deposit Account Name Human Genome Sciences, Inc. <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 		3. ADDITIONAL FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Fee Code</th> <th style="text-align: center;">Large Entity Fee (\$)</th> <th style="text-align: center;">Small Entity Fee (\$)</th> <th style="text-align: right;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td style="text-align: center;">130</td><td style="text-align: center;">205</td><td style="text-align: right;">Surcharge - late filing fee or oath</td><td style="text-align: right;">\$ 130.00</td></tr> <tr><td>127</td><td style="text-align: center;">50</td><td style="text-align: center;">227</td><td style="text-align: right;">Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td style="text-align: center;">130</td><td style="text-align: center;">139</td><td style="text-align: right;">Non-English specification</td><td></td></tr> <tr><td>142</td><td 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Submitted By		Complete if applicable	
Name (Print/Type)	Janet M/Martineau	Registration No.:	46,903
Signature:	<i>Janet M. Martineau</i>		Date: <i>January 30, 2002</i>

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